## CITY URBAN HEALTH SOCIETY, MUNICIPAL CORPORATION AURANGABAD

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## QUALITY ASSURANCE PROGRAMM ASSISTANT

## SELECTED & WAITED LIST

## WALK IN INTERVIEW DATE - 06.03.2020

Sr.No	Application No.	Name	Remark
1	T-7-9	RITA KATHU GAIKWAD	Selected - 1
1	Q.A .T-6-24	Shraddha Ramrao Kendre	Waiting - 1

Medica icer of Health Aurangabad Municipal Corporation